## IDAHO EMSPC MEETING MINUTES

# May 11, 2007

A meeting of the Idaho Emergency Medical Services Physician Commission was held on this date in the Ivy Room of the Grove Hotel, 245 S. Capitol Blvd. Boise Idaho. Chairman Kim called the meeting to order at 9:40 a.m.

**Members Present:** Member's Position:

Adam Deutchman, M.D. American College of Surgeons Committee on Trauma

Bat Masterson Citizen Representative
Cay Berg, M.D. Idaho EMS Bureau
Curtis Sandy, M.D. State Board of Medicine
David Kim, M.D. Idaho Medical Association
Elmer Martinez Citizen Representative

Murry Sturkie, D.O. American College of Emergency Physicians, Idaho Chapter

Scott French, M.D. Idaho Association of Counties

**Members Absent:** Member's Position:

Debra McKinnon, D.O. Idaho Fire Chiefs Association Keith Sivertson, M.D. Idaho Hospital Association

Kenny Bramwell, M.D. American Academy of Pediatrics, Idaho Chapter

**Vacant Seats:** N/A

Others Present: Other's Position:

Andy Edgar Idaho EMS Bureau Regional Consultant

Barbara Pyle Donnelly EMS
Bill Arsenault WFC Rescue

Bruce Allcott
Cameo Fox
Dene Miller
Denise Gill
Dia Gainor

Burley Fire Department/ IFCA
Ada County Paramedics
Gooding County EMS
Gooding County EMS
Idaho EMS Bureau Chief

John Cramer Idaho EMS Bureau Systems Information Manger

Julie LindquistGrand View AmbulanceKarl MalottNampa Fire DepartmentKen SchwabTeton Valley Ambulance

Mark Phillips Emergency Response Ambulance Mark Robertson Washington County Paramedics

Mary Lou Davis Fremont County EMS

Michele Carreras Idaho EMS Bureau, State Communications Manager Nick Nudell Idaho EMS Bureau Regional Operations Manager

Rodney Willis Emergency Response

Roy Allen Pocatello Fire Department

Russ Pierson Idaho EMS Bureau Regional Consultant Tawni Newton Idaho EMS Bureau Credentialing Manager

Tom Allen Nampa Fire Department/ IFCA

Valerie Fend-Boehm Idaho EMS Bureau Administrative Assistant
Wayne Denny Idaho EMS Bureau System Development Manager
William F. Powell Idaho Dept. of Health and Welfare- APS (Rules Unit)

## **Approval of Minutes:**

Commissioner Sturkie, American College of Emergency Physicians, Idaho Chapter, moved and Commissioner French, Idaho Association of Counties, seconded to accept the draft minutes as amended.

Motion passed unanimously.

## **EMSPC Budget Update**

Commissioner French provided a review of year to date budgetary expenditures and estimates for fiscal year (FY) 2008. The Commission has maintained its estimated budget for FY07 and is projected to stay well within budget during FY08. The Commission continues to hold some meetings outside of Boise. Nick Nudell, Idaho EMS Bureau, addressed questions of the Commission.

## **EMSPC** Rules Update and Review

Chairman Kim provided a brief overview of the EMSPC Rules town hall meetings and public comment period. Written and compiled meeting comments were presented to the Commission for review. The task of the EMSPC, Chairman Kim continued, is to address any changes to the EMSPC Rules based on public comment or further review. William F. Powell, Idaho Dept. of Health and Welfare, Rules Unit, presented the process remaining for rules review and approval. Mr. Powell also addressed Commissioners' questions relating to rules, effective dates, and the relationship of the standards manual to the rules. Sections of rule marked for review at the next meeting included language consistency, EMT scope of practice (SOP) limitations in the hospital setting, and non-punitive restrictions to individual provider SOP. A more detailed review of the rules will occur at the next EMSPC meeting.

## Wildland Fire Limited Request for Recognition Sub-Committee Report

Commissioner Sandy presented a response from Kim Christenson, Chairperson of the National Wildfire Coordinating Group (NWCG) and reported on related concerns voiced at the EMSPC Rules town hall meeting in Salmon. Dia Gainor, Idaho EMS Bureau, replied to Commissioner Sandy's question, that, to her knowledge, the NWCG has met perhaps once in the past year. Ms. Gainor encouraged the EMSPC to contact Jim Upchurch, MD, MA, NREMT-P, who shares

concern with the EMSPC regarding EMS and wildland fire issues. The subcommittee will attempt to contact Dr. Upchurch and update the Commission at the July meeting.

#### **EMS Code Task Force**

Commissioner Sandy briefly reported continuing Task Force discussions. Consensus on a need for a system-wide single point of independent medical authority was reached. The form of that medical authority has not yet been determined. The Task Force will continue to meet and focus on medical authority, operation and political components.

# Data Collection, National EMS Information System and the Idaho PCR Pilot

John Cramer, Idaho EMS Bureau, presented the PCR data collection system currently being piloted across the state. General information was presented as well as specifics relating to airway data collection, information retrieval, automated alerts, and other items requested by the EMSPC. The current application, Mr. Cramer continued, has limited ability to customize data collection points and was incapable of capturing all EMSPC requested airway elements without significant enhancements. The Commissioners discussed balancing the expressed need for capturing relevant airway information for Idaho and cost/ use analysis. In coming months the EMS Bureau, Ms. Gainor stated, will request proposals relating to PCR collection applications. The request will include a sub-quote to capturing data elements called for by the EMSPC. After this process, Ms Gainor continued, the Bureau will be better able to respond to the Commission's questions regarding the financial and resource costs of the requested data elements.

#### **Executive Session**

An executive session of the EMSPC was held to discuss an EMS provider complaint against an Idaho Medical Director and a related communication with the Idaho Board of Medicine. Several motions related to executive session procedure occurred for Idaho Open Meeting Law compliance. The Commission, in consultation with Corey Cartwright, Deputy Attorney General, concluded they had no jurisdiction over the complaint. Open dialogue between the EMSPC and Idaho Board of Medicine regarding EMS Medical Director issues was also reaffirmed.

Commissioner Deutchman, American College of Surgeons Committee on Trauma moved and Commissioner Masterson, Citizen Representative, seconded to hold an executive session today at approximately 1:30pm.

Motion passed unanimously.

Commissioner Masterson, Citizen Representative, moved and Commissioner Sturkie, American College of Emergency Physicians, Idaho Chapter, seconded to go into executive session to discuss a matter pursuant to Idaho Code Section 67-2345 section 1; B, D, and F. Motion passed unanimously. No abstentions.

Commissioner Masterson, Citizen Representative, moved and Commissioner Deutchman, American College of Surgeons Committee on Trauma, seconded to come out of executive session.

Motion passed unanimously. No abstentions.

Commissioner Sturkie, American College of Emergency Physicians, Idaho Chapter moved and Commissioner Sandy, Idaho Board of Medicine, seconded to respond to complainant of case 07-1 such that EMSPC does not have jurisdiction.

Motion passed.

**Abstention: Commissioner French** 

## **Scope of Practice for EMS Providers**

Endotracheal intubation letter review

Chairman Kim presented and the EMSPC approved a draft letter to the National Highway Safety Department requesting clarification of specific intubation techniques included in the National SOP Model.

#### EMT-I/ Advanced EMT SOP Comparison:

The EMSPC reviewed the EMT-I and Advanced EMT SOP for skills to be removed with the elimination of the EMT-I. The Commission added CPAP as an optional AEMT skill. Arguments for adding the skill included consideration of the rural areas with no paramedics available and the previous allowance of intubation as an optional AEMT skill. Opposition to adding CPAP concerned the complexities of choosing a patient population, non-inclusion in the National Scope of Practice Model, and lack of supporting research.

Commissioner Sturkie, American College of Emergency Physicians, Idaho Chapter, moved and Commissioner Sandy, Idaho Board of Medicine, seconded to add CPAP as optional AEMT skill for patients over 16yo as a 2.

Motion passed.

For: Commissioners Deutchman, Martinez, French, Sturkie, and Sandy

Opposed: Commissioners Berg, Kim, and Masterson

#### Extrication Awareness and Scope of Practice

Chairman Kim initiated a discussion of extrication awareness related to the SOP by providing a review of the motions passed at the April EMSPC meeting. Bruce Allcott, Burley Fire Department/ IFCA, provided an overview of extrication related components of sample training programs and responded to Commissioners' questions. EMSPC was concerned about the lack of language clarity regarding removal skills. Commissioner Berg stated the Commission's intent that the removal skills language be confined to patient access and patient packaging. Ms. Gainor expressed concern with over simplification of extrication related issues and cited the National Fire Protection Association 2000 and 2004 "Standards on Operations and Training for Technical Search and Rescue Incidents" recommendations for extrication removal skills training. The EMSPC identified their intent and will continue to watch development of education and resources regarding extrication awareness and removal skills.

#### Scope of Practice "Floor/Ceiling"

The EMSPC completed review of the draft scope of practice (SOP) for skills to be designated as included in the floor as primary provider level requirements and those skills which were additional - above the floor. Inclusion in the floor at all levels was extrication awareness and patient access. Also added to the Advanced EMT SOP was optional CPAP. The Paramedic SOP includes only floor skills because optional skills are classified as critical care transport. Ms. Gainor testified in support of including language in the EMSPC rules specifically outlining the ability for agency medical directors to choose optional modules for their agencies. Chairman Kim reminded the Commission that the organization and formation of optional skill modules is outside the scope of the Commission's work.

#### Paramedic Paralytic-Assisted Intubation

The EMS Physician Commission reviewed possible items to be included in a Paramedic RSI Intubation protocol. The Commission's discussion resulted in the outlined elements of standards in Appendix A. Training, monitoring and remediation were not reviewed and further discussion will occur at the July EMSPC meeting.

## **EMSPC Logo/ Website:**

Chairman Kim presented various colors for the EMSPC logo. All color options were rejected, the Commission requested additional samples, and provided guidance for color selection. Valerie Fend-Boehm, Idaho EMS Bureau, requested guidance on an EMSPC vision statement for the EMSPC website. Commissioners will bring draft wording for the vision statement to the July meeting.

#### **New Business**

Commissioner Sturkie extended greetings and an offer from the Idaho Consortium of EMS Educators to encourage open communication. The EMSPC accepted the gesture and restated their goal of transparency and openness.

## **Future Meeting Schedule**

The EMSPC will meet bi-monthly through November. Future meeting dates are July 13 in Boise, September 14 in Coeur d'Alene, and November 9, 2007, with the option of cancellation. Meeting time will be 9:30 a.m.-5:30 p.m. Public remote participation at the Idaho EMS Bureau Regional Offices is currently available. Please contact the EMS Bureau if interested in participating remotely or for more information.

## Adjournment

It was moved by Commissioner French, Idaho Association of Counties, and Commissioner Deutchman, American College of Surgeons Committee on Trauma, seconded to adjourn the May 11, 2007 Idaho Emergency Medical Services Physician Commission meeting at 5:36 p.m. The motion passed unanimously.

David Kim, M.D., Chairman Idaho EMS Physician Commission 1 Appendix A

#### **EMSPC RSI Statewide Protocol**

**Patient Selection** 

Adult Patient requires intubation; AND

/ is not flaccid, or

/ has intact protective airway reflexes

Not a difficult airway

Peds Patient requires intubation; AND

/ is not flaccid, or

/ has intact protective airway reflexes

Not a difficult airway

**Equipment** 

Laryngoscope blades Macintosh other blade types permissible

requires 2,3,4 blade sizes (at least two types of three sizes)

adult sizes ped sizes

Miller

Pulse oximetry, continuous

must have at least one Rescue device **LMA** 

available

Combitube King LT other

must have at least one Tube placement

ETCO2, qualitative available

esophageal detector device (EDD)

**Selection of Tube Size** 

**Intubation Attempts** 

Provider limited to 3 attempts Patient limited to 5 attempts

NaEMSP definition of attempt: insertion of laryngoscope blade into mouth

**Confirmation of Tube** 

**Placement** 

Utilize multiple methods Breath sounds

Epigastric sounds

ETCO2 EDD

Patient response

#### **PCR Documentation**

Number of attempts

Techniques utilized to confirm tube placement

Pre and post-intubation pulse ox

Tube size Tube depth

How tube is secured

Reassessment of tube depth and tracheal placement after patient

transfers

Pre and post-intubation breath sounds Hypoxia/bradycardia during intubation

Premeds

Sedation meds

**Paralytics** 

Preoxygenation by NRB with 100% FiO2

3-5 minutes

avoid BVM unless SpO2 less than 94%

Cricoid pressure

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